## DESIGNATED PHYSICAL EXAMS CHECKLIST

| Item                 | SG1  | SG II                       | SG III                      | NFO/NFS<br>NAP/NAEP          | A/C HELO                    | A/C FW                       | APT                          | ATC                          | UAV                          |
|----------------------|--|-----------------------------|-----------------------------|------------------------------|-----------------------------|------------------------------|------------------------------|------------------------------|------------------------------|
| DVA<br>(SEE<br>NOTE) | <20/100<br>CORR TO<br>20/20  | <20/200<br>CORR TO<br>20/20 | <20/400<br>CORR TO<br>20/20 | NO LIMIT<br>CORR TO<br>20/20 | ≤20/100<br>CORR TO<br>20/20 | NO LIMIT<br>CORR TO<br>20/20 | NO LIMIT<br>CORR TO<br>20/20 | NO LIMIT<br>CORR TO<br>20/20 | NO LIMIT<br>CORR TO<br>20/20 |
| NVA                  | NO LIMIT PROVIDED CORRECTABLE TO 20/20   |                             |                             |                              |                             |                              |                              |                              |                              |
| REF<br>ERROR         | NO LIMIT ON REFRACTION. MANIFEST REQUIRED ON DVA >20/20  |                             |                             |                              |                             |                              |                              |                              |                              |
| PHORIAS              | 6ESO<br>6EXO<br>1.5HYPER   | 6ESO<br>6EXO<br>1.5HYPER    | 6ESO<br>6EXO<br>1.5HYPER    | NOHOSH                       | NOHOSH                      | NOHOSH                       | NOHOSH                       | NOHOSH                       | 6ESO<br>6EXO<br>1.5HYPER     |
| DEPTH                | MUST PASS ONE OF: AFVT A-D, VERHOEFF 8/8 OR 16/16, RANDOT REQUIRED REQUIRED REQUIRED REQUIRED  |                             |                             |                              |                             |                              | NOT<br>REQUIRED              | NOT<br>REQUIRED              | SAME AS<br>SG1               |
| COLOR<br>VISION      | PIP 12/14 ISHIHARA 12/14 ON 16 PLATE TEST, FALANT 9/9 OR 16/18   |                             |                             |                              |                             |                              | NOT<br>REQUIRED              | SAME AS<br>SG1               | SAME AS<br>SG1               |
| IOP                  | Must be less than 22mmhg and no more than 4 difference between eyes. Perform on all examinations   |                             |                             |                              |                             |                              |                              |                              |                              |
| ECG                  | Required Every 5 years at ages 25, 30, 35, 40 till age 50 then annually on all aviation duty physical exams. SEE SPECIAL ON NASA APPLICANTS  |                             |                             |                              |                             |                              |                              |                              |                              |
| URINE                | OCCULT BLOOD, PROTEIN, AND GLUCOSE BY DIPSTICK   |                             |                             |                              |                             |                              |                              |                              |                              |
| BLOOD                | ANNUALLY: HIV  |                             |                             |                              |                             |                              |                              |                              |                              |
| TESTS                | EVERY FIVE YEARS: HCT, CHOLESTEROL, HDL, LDL, TRIGLYCERIDES, FASTING BLOOD SUGAR   |                             |                             |                              |                             |                              |                              |                              |                              |
| CXR                  | REQUIRED ONLY WHEN CLINICALLY INDICATED (SEE SPECIAL ON NASA APPLICANTS)   |                             |                             |                              |                             |                              |                              |                              |                              |
| B/P                  | MUST BE LESS THAN 140/90   |                             |                             |                              |                             |                              |                              |                              |                              |
| PULSE                | MUST BE <100 AND >45, IF <45 DOCUMENT APPROPRIATE CARDIO RESPONSE TO EXERCISE  |                             |                             |                              |                             |                              |                              |                              |                              |
| WEIGHT               | MUST BE 235LBS OR LESS MUST MEET GENERAL OPNAV STDS  |                             |                             |                              |                             |                              |                              |                              |                              |
| AUDIO                | FREQ BETTER EAR WORSE EAR   500HZ 35DB 35DB   1000HZ 30DB 50DB   2000HZ 30DB 50DB  |                             |                             |                              |                             |                              |                              |                              |                              |
| SPECIAL              | : <u>Interservice Transfer</u> : Physical exams must be less than one year old, and must be sent to BUMED M3F1 for commissioning endorsement before aviation determination can be made.  |                             |                             |                              |                             |                              |                              |                              |                              |
|                      | NFO to Pilot transition program: Refer to SNA standards  |                             |                             |                              |                             |                              |                              |                              |                              |
|                      | NASA Applicants: Applicants for Astronaut must meet SG1 standards. Mission specialist applicants must meet SG2 standards. Long form physical examination is required with all required labs, ECG, CXR, and manifest refraction. Submission of SF 88, SF 93, and JSC 465 (NASA Form) Supplemental Medical Hx, and ECG tracing required. Physical exam must be within timeframe noted by NAVADMIN msg which announces the program. |                             |                             |                              |                             |                              |                              |                              |                              |
| NOTE                 | DVA of 20/20 in Class 1 personnel is 20/20 with zero misses on 20/20 line. DVA of 20/20 in Class 2 and 3 personnel is considered 20/20 with up to 3 misses on 20/20 line (7/10)  |                             |                             |                              |                             |                              |                              |                              |                              |